



## KIWANIS CLUB OF HAGERSTOWN MEMBERSHIP APPLICATION

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Home Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Email \_\_\_\_\_

Business Name \_\_\_\_\_ Job Title \_\_\_\_\_

Business Address \_\_\_\_\_

Business Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Where do you prefer Kiwanis related mail be sent? \_\_\_\_\_ Home \_\_\_\_\_ Business

Spouse's Name \_\_\_\_\_ Wedding Anniversary \_\_\_\_\_

Names and ages of Children \_\_\_\_\_

Membership in Business, Professional and Community Organizations \_\_\_\_\_

\_\_\_\_\_

Hobbies and Interests \_\_\_\_\_

Are you a former Kiwanian or a Transfer? \_\_\_\_\_ No \_\_\_\_\_ Yes

If yes, former Club name \_\_\_\_\_ Length of Membership \_\_\_\_\_

Preference of Committee Assignments:

\_\_\_\_\_ Administration/ Meetings \_\_\_\_\_ Programs \_\_\_\_\_ Membership \_\_\_\_\_ Newsletter

\_\_\_\_\_ Community Service \_\_\_\_\_ Fundraising \_\_\_\_\_ Youth Services

What do you feel are the most important challenges in our community? \_\_\_\_\_

\_\_\_\_\_

Name of Sponsor

\_\_\_\_\_

Your Signature \_\_\_\_\_ Date \_\_\_\_\_